

Image# 12952255850

PAGE 1 / 5

FEC FORM 9**24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR
ELECTIONEERING COMMUNICATIONS****1. Person Making the Disbursements/Obligations**

(a) Name

AMERICAN CONSERVATIVE UNION(b) Address (number and street) ☐ check if different than previously reported
1331 H STREET NW SUITE 500

(c) City, State and ZIP Code

WASHINGTON

DC

20005

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number**C** C30001952**3. Is This Statement**☐

New

or

☒

Amended

4. Covering PeriodMM / DD / YYYY
02 / 06 / 2012DD / MM / YYYY
06 / 02 / 2012YYYY / MM / DD
2012 / 06 / 02

through

MM / DD / YYYY
03 / 07 / 2012DD / MM / YYYY
07 / 03 / 2012YYYY / MM / DD
2012 / 07 / 03**5. (a) Date of Public Distribution(s)**MM / DD / YYYY
03 / 07 / 2012DD / MM / YYYY
07 / 03 / 2012YYYY / MM / DD
2012 / 07 / 03(b) Communication Title ACU The Brakes**6. The filer is a(n):** (a) ☐ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)(d) ☒ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15(e) ☐ Other, specify: _____**7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account?**Yes ☐No ☒**8. Custodian of Records**

(a) Name

Melissa Bowman

(b) Address (number and street)

1331 H ST NW STE 500

(c) City, State and ZIP Code

WASHINGTON

DC

20005

(d) Name of Employer or Principal Place of Business

American Conservative Union

(e) Occupation

Director of Operations

9. Total Donations This Statement

, , .00

10. Total Disbursements/Obligations This Statement

, , 15589.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Melissa Bowman

SIGNATURE

Melissa Bowman

[Electronically Filed]

DATE

07/05/2012

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

PAGE 2 OF 5

11. Person(s) Sharing/Exercising Control**A.** (a) Name Transaction ID : F91.000001

Robert Keller

(b) Address (number and street) 1331 H ST NW STE 500

(c) City, State and ZIP Code

WASHINGTON

DC 20005

(d) Name of Employer or Principal Place of Business

American Conservative Union

(e) Occupation

Executive Director

B. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

C. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

D. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

E. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

SCHEDULE 9-B

PAGE 3 OF 5

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group				Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 02 / 09 / 2012 </div>	
Mailing Address of Payee 815 Slaters Lane				Amount <div style="border: 1px solid black; padding: 2px;"> 1500.00 </div>	
City Alexandria		State VA		Zip Code 22314	
Name of Employer		Occupation		Communication Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 02 / 09 / 2012 </div>	
Purpose of Disbursement (Including title(s) of communication(s)) Radio Ad: "ACU The Brakes: Roby"				Transaction ID : F93.000001	
Name of Federal Candidate Martha Roby		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: AL District: 02	
Transaction ID : F94.000002				Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate Barack Obama		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		State: AL District:	
Transaction ID : F94.000003				Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:	
Disbursement/Obligation For:				<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
B. Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group				Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 02 / 12 / 2012 </div>	
Mailing Address of Payee 815 Slaters Lane				Amount <div style="border: 1px solid black; padding: 2px;"> 1892.00 </div>	
City Alexandria		State VA		Zip Code 22314	
Name of Employer		Occupation		Communication Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 02 / 12 / 2012 </div>	
Purpose of Disbursement (Including title(s) of communication(s)) Radio Ad - "ACU The Brakes: Palazzo"				Transaction ID : F93.000002	
Name of Federal Candidate Steven McCarty Palazzo		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: MS District: 04	
Transaction ID : F94.000005				Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate Barack Obama		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		State: MS District:	
Transaction ID : F94.000006				Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:	
Disbursement/Obligation For:				<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶				<div style="border: 1px solid black; padding: 2px;"> 3392.00 </div>	
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)				<div style="border: 1px solid black; padding: 2px;"> </div>	

SCHEDULE 9-B

PAGE 4 OF 5

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group <hr/> Mailing Address of Payee 815 Slaters Lane <hr/> City State Zip Code Alexandria VA 22314 <hr/> Name of Employer Occupation <hr/> Purpose of Disbursement (Including title(s) of communication(s)) Radio Ad - "ACU The Brakes"				Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 02 / 12 / 2012 </div> Amount <div style="border: 1px solid black; padding: 2px;"> 2637.00 </div> Communication Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 02 / 12 / 2012 </div>	
Transaction ID : F94.000008 Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: VA Barack Obama <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President				Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President				Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President				Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

B. Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group <hr/> Mailing Address of Payee 815 Slaters Lane <hr/> City State Zip Code Alexandria VA 22314 <hr/> Name of Employer Occupation <hr/> Purpose of Disbursement (Including title(s) of communication(s)) Radio Ad - "ACU The Brakes: Schilling"				Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 02 / 19 / 2012 </div> Amount <div style="border: 1px solid black; padding: 2px;"> 1560.00 </div> Communication Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 12 / 19 / 2012 </div>	
Transaction ID : F94.000010 Name of Federal Candidate Office Sought: <input checked="" type="checkbox"/> House State: IL Robert T. Schilling <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President				Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Transaction ID : F94.000011 Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: IL Barack Obama <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President				Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President				Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

SUBTOTAL of Disbursements/Obligations This Page (optional) ▶	<div style="border: 1px solid black; padding: 2px;"> 4197.00 </div>
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)	<div style="border: 1px solid black; padding: 2px;"> </div>

SCHEDULE 9-B

PAGE 5 OF 5

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Metzer Media Services, Inc.				Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 03 / 07 / 2012 </div>	
Mailing Address of Payee 600 Fairmount Ave Suite 306				Amount <div style="border: 1px solid black; padding: 2px;"> 8000.00 </div>	
City Towson		State MD		Zip Code 21286	
Name of Employer		Occupation		Communication Date <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 03 / 07 / 2012 </div>	
Purpose of Disbursement (Including title(s) of communication(s)) Radio Ad - "ACU The Brakes: Bachus"				Transaction ID : F93.000005	
Name of Federal Candidate Barack Obama		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: AL District:		Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Transaction ID : F94.000013					
Name of Federal Candidate Spencer T Bachus III		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 06		Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Transaction ID : F94.000014					
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
B. Full Name (Last, First, Middle Initial) of Payee					
Mailing Address of Payee				Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>	
City		State		Zip Code	
Name of Employer		Occupation		Communication Date <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Purpose of Disbursement (Including title(s) of communication(s))					
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶				<div style="border: 1px solid black; padding: 2px;"> 8000.00 </div>	
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)				<div style="border: 1px solid black; padding: 2px;"> 15589.00 </div>	